

AMERICAN MEDICAL TIMES

Being a Weekly Series of the New York Journal of Medicine.

No. XX. } NEW SERIES. NEW YORK: SATURDAY, JUNE 13, 1863. { Mail Subscribers, \$3 per Ann.
VOL. VI. } { City and Canadian, 3 50 "
{ Single Numbers, 10 cents.

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Original Lectures.

DISEASES OF THE RESPIRATORY ORGANS
IN CHILDREN.BEING A COURSE OF LECTURES PREPARED FOR DELIVERY DURING THE SPRING
SESSION OF 1862 IN THE COLLEGE OF PHYSICIANS AND SURGEONS, N. Y.

BY THE LATE

C. VAN ALLEN ANDERSON, M.D.,

PHYSICIAN TO CHILDREN'S DEPARTMENT, DEMILT DISPENSARY, N. Y.

LECTURE II.—PART I.

CROUP.

At our last meeting, gentlemen, we studied the nature and consequences of unexpanded and of collapsed lung, and of the different forms of coryza. We found that the first produced death, not by disease, but by a non-fulfilment of a vital function; and that the second—an inflammation of the mucous membrane—proved fatal through an interference with the nutritive processes, or else by a directly lowering influence upon the general system. To-day, I propose to bring to your notice a complaint which affects the larynx and trachea—which shuts the door of the respiratory apparatus against the life-giving air, and kills by the cruel process of suffocation; in other words, Croup, or cynanche trachealis. It is, as you know, a peculiar form of laryngitis, occurring most frequently in children, and distinguished by the formation of a false membrane in the air passages.

Its history is interesting. But by the word history I do not mean the description of the disease itself alone; I mean also the first recognition of it by medical men, the various opinions that have been promulgated, and discoveries that have been made in relation to its nature, and the numerous steps that have been taken one after another until we have acquired our present really imperfect acquaintance with it. It seems to me that this kind of knowledge should be more cultivated by us; for we have arrived at that stage of our science when it becomes apparent to the dullest that medicine is yet in its infancy; that wonderfully illimitable, unexplored fields lie before us; and so, by sometimes looking back to the point from which we started, and comparing our utter ignorance then with the glimmer of light that we have now, we may gather fresh courage for more brilliant discoveries in the future.

Croup appears to have been known in a dim, confused way to the most ancient medical writers. Hippocrates makes a brief, indistinct mention of a disorder that has been thought by some to be this disease. A more faithful description is found in the works of Aretæus of Cappadocia, a physician who practised in Rome between the reigns of Vespasian and Adrian. Many passages are exceedingly graphic, as for instance the following picture of the last stage: "The pallid or livid countenances of these patients assume a sad expression, while the tonsils are pressed together. When they lie down they rise up again that they may assume a sitting position, not enduring a recumbent position; but if they are sitting up, wanting rest, they are again forced to lie down; and many of them standing upright, walk about, for they are unable to remain quiet. Inspiration is great, expiration truly small. There is hoarseness, and want of voice. These signs rapidly grow worse, when suddenly they die in collapse." Artius, an Alexandrian, who flourished about four centuries later, while using the words of Aretæus, added to them many comments and particulars which render it beyond doubt that in his day the disease was well known, and was the same that had been mentioned by the Roman writer.

The next mention of croup appears at the end of the sixteenth century in the works of Baillou, of Paris, who was the first to dwell on its anatomical characters. In the

winter of 1576 it prevailed extensively at Paris, carrying off both children and adults, among the latter Baillou's father-in-law. He was therefore interested to a great degree in discovering its true nature, and the treatise, supported by clinical testimony, which he published, has since been extensively quoted, as affording the first scientific observations of modern times.

Whether it was that attention was really first drawn to this disease by Baillou, or whether, like some maladies of more recent periods, it then began to extend its influence more widely, and to penetrate more deeply into the various strata of human life, this much is certain, that since his time frequent and severe epidemics of croup have been observed by medical authorities. I am myself inclined to think that the disease did in fact become more widely diffused in the sixteenth century. The ancients were quite as keen in their remarks upon disease as we moderns are, and, indeed, many of our most successful remedies were anticipated by them—take, for example, the proposal of Artius to cure aneurism by ligation of the affected artery, an operation which it required so great a genius as John Hunter to revive: or take the accurate observations upon pathological conditions which are found in the works of Hippocrates, the very father of medicine—and it seems to me that they could hardly have overlooked a disease so distressingly fatal, and so distinctly marked in its various symptoms and stages, as croup is among us, had it prevailed then as generally as it does now. Moreover, many of us—not only those who have been in practice many years, and who are therefore entitled to guide us by their wisdom and experience, but also younger members of the profession—have seen diseases, for a long time confined to one country or one district, suddenly taking up their line of march like a conquering army, and seizing upon all known parts of the civilized world. I need not go back to the history of syphilis first appearing at the siege of Naples, and thence extending to all regions of the earth; nor need I refer to Asiatic cholera, starting from the East, crossing continents and oceans in its progress, and leaving its first traces everywhere, so that every year we have a greater or less number of sporadic cases; for, when I mention diphtheria, you will recognise a distemper that within the last four years has assumed the character I mention: that has become a native of England and of America, in both of which countries it was before to a certain extent unknown. Why croup, therefore, should have remained quiescent before, and should have spread only since the time of Baillou, I do not understand; but that it has done so appears to me not by any means improbable.

Next it made its appearance in Spain, and prevailed there for many years. It received in that country the name of *garotillo*, because those who were attacked by it perished as if they had been strangled by a cord. Mercatus, the physician of Philip II. and Philip III., published his observations upon it under the title of *consultations*. He remarks upon it as the most serious disorder he had ever witnessed, and is astonished at the rapidity with which it destroys life, and at the disproportion between the real danger and the appearance of the disease. Another Spanish physician also, who wrote twenty years later, does not differ in his estimate of it.

In the month of June, 1618, croup was first seen in Italy, in Chiaia, a market-town of Naples. Many children were destroyed by it, very much to the alarm of the doctors who had never seen it before. It was considered to be a consequence of infection rather than of contagion, and was ascribed to the exhalations which escaped from the ground after the earthquake of 1616; but its strangulatory nature was still insisted on by all who were brought in contact with it. There was one remarkable point about it, namely, that it first seized on the lower animals who kept their muzzles nearest the earth, then on children in the succeeding years. At the same time, or shortly afterwards, there were epidemics of croup at Palermo and at Messina.

Since that period frequent descriptions of croup have

been brought before the world. Ghisi in 1747 gave an exact account of the epidemic which showed itself at Cremona in the month of May of that year. He dwells particularly upon the fatal nature of the disease, and gives a faithful picture of the sufferings of those who perished by it; moreover, he makes mention of the case of a little girl, who expectorated a tubular false membrane some moments before dying, and of finding in the trachea of another child opened after death, a similar formation. Treatises were written upon it by Starz, in 1749; Middleton, in 1752; Bergino, in 1755; Berghen, in 1759; Wahlbohm, in 1761, and Wilcke, in 1764.

The name of *Croup* was first proposed for this affection in 1718 by a Scotchman, Dr. Blair, of Cupar Angus; and a valuable essay, drawn from original observations, describing the disease with accuracy, and proposing tracheotomy for its relief, was published at Edinburgh by another Scotchman, Dr. Home, in 1765. He was succeeded by several writers in quick succession, one of the ablest of them being Dr. Samuel Bard, of this city, a founder of the New York Hospital, and an illustrious member of the medical faculty of Columbia College (Prize Essay by Albers, of Bremen, in 1805).

Attention was more particularly called to the true nature of croup in consequence of two memoirs read before the French Academy of Medicine in 1821, by M. Bretonneau, of Tours. An epidemic of the disease known since the time of this distinguished man as diphtheria, attracted his earnest and anxious study of its phenomena. It is unnecessary to enter into a full account of his researches, though the reasoning by which he reached his conclusions displays great talent. After having conclusively shown the existence of a disorder characterized by the effusion of false or mucous surfaces, and before his time confounded with malignant sore throat, he attempted to prove its identity with croup. He did indeed triumphantly demonstrate that, when the pseudo-membrane of diphtheria extends to the larynx and trachea, it produces exactly the same symptoms as any false membrane in the same situation, and cited many cases which firmly sustain his position. But after the publication of his views in 1826 there were many and vigorous protests against croup and diphtheria being considered the same disease, not only by English writers, but also by continental authorities. Bucheteau was the first, I believe, to raise his voice against the sweeping assertions of the physician of Tours, which he did in the same year 1826; and he was followed by Dr. Abercrombie in a treatise on an epidemic which prevailed in Edinburgh, and in which a clear distinction was made between diphtheria and croup—and by others in whose works the same difference was insisted upon.

I will not weary you by an account of the various opinions, *pro and con*, which have been urged for the last thirty years. I shall content myself with stating that the distinction between the two diseases is now, as far as my information goes, clearly recognised; at any rate, that among American physicians diphtheria is not croup, but only a secondary form of it; and, therefore, I shall draw your attention to the diphtheritic inflammation, merely as a modification of the disease.

Croup is one of the most alarming and fatal maladies that curse humanity, and numbers various distinguished victims. The brother of the present Emperor of France was destroyed by it, his sad and sudden death producing numerous valuable works upon the disease in consequence of the offer of a prize by Napoleon I. General Washington is claimed by Bretonneau as one among the numerous martyrs to the diphtheritic form. Any one who reads our weekly bills of mortality will discover its frequency, and the danger that attends its presence. Generally it attacks children between the ages of one and twelve years, but oftentimes those under five years of age. It has been seen in an infant of eight days old, in one of three months, and in one of eight months. It appears from the fifth report of the Registrar-General of Great Britain that, while 1022 out of 98,391

deaths in London took place from croup, 1013, or 99.9 per cent., occurred before the age of fifteen, and 879, or 87.8 per cent., before the age of five years. Of twenty-six cases which Dr. West has recorded, twenty-five occurred in children under five years, and twelve in children under two. Andral gives the following table of ages in 332 cases: He found it during the first month in 1 case, during the third month in 1 case, during the fifth month in 1 case, from five to twelve months in 18 cases, from one to two years in 61 cases, from two to three years in 45 cases, from three to four years in 54 cases, from four to five years in 42 cases, from five to six years in 29 cases, from six to seven years in 29 cases, from seven to eight years in 3 cases, from eight to eleven years in 6 cases, from eleven to fifteen years in 7 cases, from fifteen to thirty years in 13 cases, from thirty to fifty years in 10 cases, from fifty to seventy years in 12 cases.

In Philadelphia, during the two years preceding 1845, 475 deaths are reported from croup in infants between two and five years, 238 in those between one and two years, 319 in those under one year, 112 in those between five and ten years, and 6 in children over ten years.*

Original Communications.

SECONDARY HÆMORRHAGE.

ITS CAUSES AND TREATMENT.

[By JOHN WILSON, SURGEON, U.S.V.,

IN CHARGE CARVER GENERAL HOSPITAL, WASHINGTON, D. C.

THE frequent occurrence of this form of hæmorrhage in field and general hospitals, the serious consequences it entails upon the wounded man, even where the resources of the surgeon have enabled him to arrest it, and above all, the many deaths that occur when, from peculiarity of situation, nature of wound, or the unavoidable delay in affording his aid, the surgeon fails in his efforts to save his patient, have suggested to our mind the propriety of offering a few remarks upon the immediate cause, as well as the prophylactic medication indicated, as we think, in these cases.

We have long been of the opinion that depravation of blood is the prolific source of this hæmorrhage; and from a tolerably large hospital experience, as well as a considerable amount of information derived from intelligent surgeons engaged in field and hospital practice, we think we may safely state that this form of bleeding generally occurs in patients whose vital status is below par, and whose wounds show no effort at reparation, but, on the contrary, remain patulous, frequently emitting a grey, shreddy, and sometimes sanious and fetid discharge. In all these cases we conceive the hæmorrhage to result from a lack of formative power in the system generally, or the part specially. Let a man receive a wound from any of the missiles of modern warfare, by which any of the trunks or branches of the arterial system is severed, and whether the wounded vessel be ligated at once or not, the risk of secondary hæmorrhage will be exactly in proportion to his power of plastic reformation. Without this power even the ligature will very often fail to protect the patient: destructive disintegration will frequently set in, and the feeble barrier which nature may have attempted to erect against the flood will yield before the *vis a tergo*, and the hæmorrhage recur. There are also many cases of wounded artery, particularly if the vessel be small, which do not immediately require the ligature, the contraction and retraction of the wounded orifice, or the formation of a clot within it, being generally sufficient to guard against immediate danger. In these cases we cannot but think that, if proper regard were paid to the hæmaturic power, nature's primary tampon would be rapidly succeeded by organized exudative

* Condle, Dis. of Chil.

matter, and the security against hæmorrhage rendered permanent. Other cases of bleeding occur where no primary breach of continuity existed, and where the bleeding proceeds from vessels involved in the destructive process of sloughing subsequently occurring in the wound.

For all these classes of secondary hæmorrhage, *proteine* in some form, we conceive to be the surest remedy. Albumen we believe to be the *prophylactic styptic par excellence*—not applied to the wound, but introduced freely into the living economy. Compared with this, all other agents we deem scarcely worthy a serious consideration. How rarely do we see those frightful hæmorrhages from a kindly granulating wound, however large it may be; and on the other hand, how frequently do we see them where no plastic exudative matter building up its structure of granules is to be seen. A single glance at a wound should be sufficient to convey to the mind of a properly educated surgical man whether, on the one hand, nature is liberally supplied with material for her work, or, on the other, whether she is suffering from a want of material in the general economy, or defective local assimilation; and yet how many there are in our profession who seem to forget the fact that, in all large breaches of continuity or loss of tissue, the material of reparation must come from without; and that in this effort much of the plastic matter is lost in the complex function of repair; and also, that, in addition to the quantity needed for the direct purpose of reconstruction, an excess is required to protect against the destructive metamorphosis of combustion, which in these cases is almost invariably above the par standard of health.

Without a just and proper appreciation of these facts, we fear that our administration of stimulants and cordials will be in vain. Nor will the success of our local disinfectant be any better. Disinfection to a wound should first begin in the *cuisine*. A healthy wound needs no disinfectant. If we were to pay less regard to the "material medica," and more to the material nutritionis, would we not more frequently save our patients? We would reiterate, therefore, our doctrine, that albumen is the best styptic for secondary hæmorrhage, and that he who neglects this fact must consent to see nature express her indignance in sloughing wounds and fearful hæmorrhages, draining his patient of his little stock of vitality, until the "pale horse" and his rider pass by, relieving him from his travail of suffering, and bearing him where the inhabitants say, "we never hunger or thirst."

PISTOL-SHOT WOUND OF BRAIN.

By ALFRED BOTTER, M.D.

OF OVID, SENECA CO., N. Y.

THE following case of pistol-shot injury to the brain I think of sufficient interest for publication, and accordingly I send you a brief account of it for that purpose. On the 19th day of February, James O'Barry, aged 17 years, of this place, was accidentally shot with a pistol in the hands of a schoolmate. The ball, which was of conical shape, three-eighths of an inch in length, and three-sixteenths of an inch in diameter at its base, entered the nose near its extremity, and a little to the left of the median line. It passed obliquely upwards and backwards, and entered the base of the brain beneath the right optic nerve, and immediately before and a little to the right of the sella turcica. It traversed the right hemisphere to the extent of three inches, and to the depth (from below upwards) of three-fourths of an inch. These facts were mainly obtained, of course, by the post-mortem examination. Immediately on the receipt of the injury, the young man applied his handkerchief to his nose, and went out of the house, the blood flowing freely upon the ground. He shortly became faint and fell. In this condition he was conveyed to his house, nearly a mile distant, and the physician of the family was summoned. An hour or more elapsed before his arrival; but he found his patient pale, with a cold, clammy surface, and small, frequent,

and feeble pulse; the hæmorrhage had ceased; his mind was clear, and he complained only of pain in his head, over and behind his right eye; the pupil of this eye was widely dilated, and the vision of it totally destroyed. The wound was probed to the depth of five inches—sufficiently to show that the removal of the ball by surgical means was impracticable. An unfavorable prognosis was given, and the patient and friends were informed that the treatment of the case could be palliative only, and that a fatal result, sooner or later, would unquestionably ensue. Several hours elapsed before reaction was fully established. This, however, did occur very well, and the patient was quite comfortable in every way until nine days after, when a slight hæmorrhage took place from the right nostril. The external wound made by the bullet had entirely healed. The loss of blood at this time was attended with very little general disturbance, and everything passed on well until the 29th of the following month (March), when a severe hæmorrhage took place. This was arrested by the perchloride of iron injected into the nostrils; but great prostration ensued, lasting for more than an hour. Two days later, the same thing occurred with similar results. On the 11th of April it occurred again, attended with convulsions, and paralysis of the left side, and slight delirium. From this he slowly rallied, recovering entirely his mental faculties, but in other respects he was much enfeebled; his appetite and rest were impaired; he had turns of nausea and vomiting, and his thirst was urgent, and his paralysis unrelieved. This state of things continued with occasional slight bleedings until the morning of April 29th, when, after a comfortable night, and after taking with a relish a light breakfast, a more profuse hæmorrhage than any of the preceding suddenly came on. Under this he expired almost instantly, the blood flowing freely for some time after he had ceased to breathe. This was the sixty-ninth day (or ten weeks, less one day) after he was wounded. That he could survive so long after so serious an injury to a vital organ, makes his case one of interest among the numerous records of brain injury. The presence of the ball in the cerebral mass had occasioned but little apparent inflammation, owing, perhaps, to the frequent occurrence of hæmorrhage; yet suppuration had taken place, and a drachm or two of pus was found in the track of the missile.

I have presented this case without comment, because it seems to me one of thoughtful and suggestive interest to the profession, and because it is one of those melancholy records we are so often called to make, which are the result oftentimes, as it was in this case, of the most reprehensible carelessness.

May 5, 1868.

Reports of Societies.

AMERICAN MEDICAL ASSOCIATION.

FOURTEENTH ANNUAL CONVENTION,

Held in the City of Chicago, June 24, 3d, and 4th, 1868.

(Concluded from page 276.)

RETIRING ADDRESS OF DR. JEWELL.

DR. WILSON JEWELL, acting President of the Association, then delivered his retiring address. He remarked that, since we last assembled in convention two years ago, as the representative body of the medical profession in this country, the delightful union of our Congress has been unexpectedly interrupted. Events the most thrilling in the history of any nation have occurred. The government of the United States, the mildest and most beneficent the world ever knew, has been assailed by an armed force. Our once happy and prosperous people have been plunged into an unnatural, causeless, and unprecedented rebellion, and thousands of families have been involved in distress

and ruin. The most endeared relations in life have been severed; the strongest ties of parental and fraternal affection alienated, while our Union, the palladium of our safety as one people, now trembles in the balance. It was not strange if the troublous element had found its way into our counsels, yet he had hope still that the present struggle would be gloriously ended by a restoration of the Union. Their cause was based on the eternal principles of civil and religious liberty, and could not fail.

The speaker then turned to the subject which was most intimately connected with the objects of the convention, and spoke of the noble part taken in the struggle by the devoted members of the profession, who, amid the thunders of battle and the din of arms, worked firm and self-possessed to mitigate the horrors of the strife, and risked being killed or taken prisoners of war rather than desert the path of duty. Theirs was no warrior's ambition; they were stimulated by no wish save that of alleviating human suffering. Many of their members were in the army, and some slept the sleep of death. First and highly valued among them was their respected President, Eli Ives, whose knowledge and experience had rendered him so valuable a medical practitioner, and whose private virtues endeared him to all. The usefulness of the Association was one of the great aims of their late President, and he predicted great things of its future.

The orator then took a retrospective view of the progress of the Association, and spoke of the signs, in its present condition and standing, which point to a bright and influential future. He quoted passages from many eminent medical men in which the influence of the Association was spoken of and hints for improvement given. He would, however, direct their attention to another subject, not that he loved Caesar less, but Rome more. He would speak of Hygiene, a science which bears no modern date, but claims its origin in the antediluvian age, is now so little understood, and presents an illimitable field for research. The fearful responsibilities of their calling should stimulate them to a thorough course of study in all that pertains to the preservation of health, the extension of the term of existence, and the alleviation of disease, where prevention was rendered impossible. There was room to hope that the American Medical Association would throw out a light which in the medical world would equal the refugence of that bright ray which shone out from the retreat of the Wittenburg student, and dissipated the darkness which until then brooded over the theological firmament. Yet this illumination could ensue only upon a careful study of the laws of Hygiene. Not that the subject was incompatible with the design of the Association; it had done great service in that department, and time would fail to tell the aid rendered by it in the past. But the vestibule of the Hygienic temple alone had as yet been attained. The method of curing disease had heretofore attracted not too much of attention, but it had perhaps thrown into the background those sanitary considerations which will teach how to prevent disease by conformity to the laws of health. This was a reform much needed, but there seemed to be a perpetual obstruction presented to its progress, and a private prejudice in the popular mind against it. He would propose a two-fold method whereby the evil might be remedied. It was to elevate Hygiene as a branch of scientific study, and give it a distinct chair in the medical colleges. He would constitute it as a curriculum of study which was essential to the reception of a diploma. He counselled also the adoption of some more popular and successful plan than had otherwise been pursued, for enlightening the public mind on the relations of preventive measures to the health of the people. The etiology of disease was the basis of the science of preventive medicine. This was being better understood than formerly, and one of the good fruits springing out of the present unhappy struggle would be the elimination of a multitude of facts bearing on the relations of military discipline to military health, and the consequent efficiency of the soldier. These

facts were of incalculable value, and would exercise a largely beneficial influence upon the health of future ages. Already a work of this kind has been authorized by the general government, which will contain an elaborate classification of military diseases, and the influence of hygienic regulations thereupon. The time was probably not far distant when each State would have its bureau of health, and recognise the indissoluble relation existing between sanitary conditions and moral developments, as well as on the physical organism. Already two cities of the Union had taken vigorous action in this matter, and the Garden City might well claim the credit of having set the example of aiming to insure civic healthfulness. He recommended that the word "Hygiene" should be written in letters of gold on the escutcheon of the Association.

On motion of Dr. SPRAGUE of New York, the thanks of the Association were tendered to the retiring President for his eloquent, patriotic, and scientific address.

Dr. DAVIS, Chairman of the committee of arrangements, presented the following list of candidates for permanent members for election:—WALTER HAY, Ill.; S. W. BICKNELL, Wis.; E. W. JENKS, Mich.; S. EARLE, Ill.; W. W. SEDGEWICK, Ill.; V. S. HURLBUT, Ill.; THOS. BEVAN, Ill.; JOHN McALLISTER, Ill.; P. H. HAYDOCK, Ill.; N. P. PETERSON, Ill.; H. N. HURLBUT, Ill.; E. C. GARDNER, Vt.; JOHN BARTLETT, Ill.; HENRY DURBAN, Ill.; R. C. HAMILL, Ill.; WEBSTER JONES, Ill.; all of whom were elected.

The following were invited to participate in the deliberations of the Convention:—A. L. MARION, Ill.; J. D. GLAZEBROOK, Indiana.

The President appointed Drs. PIERSON of Ill., BEARDSLEY of Conn., and CUTTER of Mass., to draft resolutions expressive of the sense of the association respecting the death of the late President, Dr. IVES.

The association then adjourned to three o'clock.

AFTERNOON SESSION.

TUESDAY, 3 P.M.

The meeting was called to order at 3 p.m., and the committee of arrangements read the following names of delegates who had arrived since the morning:—

Dr. WM. M. HUNTINGTON, Vt.; Drs. JAS. DUNLAP and LYMAN BARTLETT, Mass.; Drs. RALPH DEMING and HORACE BERR, Conn.; Dr. B. L. DELANO, N. Y.; Dr. DANL. HOLMES, Penn.; Drs. W. C. HILL and C. McDERMOTT, Ohio; Drs. HIRAM MANN, A. L. MIMAM, VAN C. SECOR, H. W. JONES, D. P. BRENDEL, THOS. BEVEN, H. N. HURLBUT, SILAS EARLE, T. D. FITCH, JOHN McALLISTER, S. R. HEVEN, S. T. HUME, J. S. KING, E. C. GARDNER, C. C. LATTIMER, SIMON CLARKE, WM. H. BYFORD, H. B. BROWN, D. E. FOOTE, JOS. PERRY, H. C. ROBBINS, J. A. BROWN, D. F. CROUSE, C. D. RANKIN, WM. ROBINSON, N. P. PETERSON, M. PARKER, Illinois; Dr. E. W. JACKIE, Mich.; Drs. S. W. BUCKNELL, JOHN G. MEECHAM, Wis.; and Dr. T. J. MENDENHALL, Missouri; Dr. TIFFIN LARKE, Kansas; R. H. GILBERT, U.S.A., Ft. Monroe, Va. (Medl. Dept. U.S.), and Dr. WM. JAYNE, Dacotah Territory.

The acting PRESIDENT appointed the following members to constitute the committee on voluntary communications: Drs. MARSH of N. Y., MAYBERRY of Penn., BYFORD of Ill., MENDENHALL of Miss., and LANGFORD of Ohio.

The report of the TREASURER was read by Dr. ASKEW, of Delaware, the Treasurer being unable to attend. He reported that owing to the unsettled state of the country and the advanced price of printing, it would be necessary to print only such papers as were of great value, and to condense those as much as possible, or the treasury could not bear the cost. The proceeds of volumes sold were \$1,982 25; balance on hand last year, \$597 61; balance on hand this year, \$504 21. Report adopted.

The Committee of Publication reported the result of their labors during the year and the number of volumes now in their possession. Report accepted.

DIARRHŒA ADIPOSEA.

Dr. GRISCOM, by leave, presented a report of a case of

Diarrhoea Adiposa, which had recently been presented in the New York Hospital, under his care. A Crimean soldier was attacked with severe dysentery during the war, which continued a year, and was followed by the above named disorder, consisting of discharges of oil from the bowels, which has continued ever since (about six years) with occasional intervals, to the average extent of two and a half ounces daily. This exceedingly rare case (for the substance resembles pure olive oil, and hardens when cool to the consistence of butter) excited much interest in professional circles, and induced the Doctor to examine all the medical records within his reach for other cases that may have occurred; and the result was a table, included in the paper read, of twenty-six cases, including his own, which were all that appear to have been reported during the last two centuries in England, France, and this country. Two other cases, only, are known to have been seen in the United States: one reported by Dr. GOULD of Boston, and one by Dr. WELLS of Connecticut, in the *N. Y. Med. Times*, of Feb., 1854. One point of remarkable interest, in connexion with Dr. Griscom's case was, the discovery that this peculiar discharge, which the patient declares to be a cause of much weakness of body (although otherwise in pretty good health), is almost entirely arrested by the exhibition daily of from six to eight ounces of alcoholic stimulus, whiskey seeming to act as a consumer of the oil, from whatever source it is derived.

The table of twenty-six cases, collected by Dr. GRISCOM, gives a resumé of the circumstances attending each; such as the amount and character of the discharge in each, the age and sex of the patients, the attendant symptoms, the result and the autopsic appearances when dissections were made.

Of the twenty-six cases, fourteen died, and of four the issue was not mentioned by the reporters. Eight recovered entirely, or were so far improved as to experience no inconvenience from the symptom. Among the fourteen fatal cases, eight were found to have diseased pancreas, and four were not examined after death.

The conclusion of Dr. Griscom's paper was a brief review of the cases in connexion with criticism of various theories which have been proposed by the reporters of the cases, and other authors. The writer chiefly referred to is CLAUDE BERNARD, the author of the able "*Mémoire sur le Pancreas*," who therein maintains that the oil is all derived from the food, and appears with the fecal discharges, in consequence of disease of the pancreas suspending the pancreatic secretion; it being the province of that fluid, according to his views, to emulsify the oily ingredients of the ingesta, and prepare them for the further stages of digestion.

Several cases of this phenomenon having occurred in connexion with diseased pancreas, Bernard used them as proofs of his views; but, as stated by Dr. Griscom, omitting the mention of those cases which gave no other evidence of diseased pancreas. Bernard further asserts that it is only in *chronic* and not acute disorders of the pancreas that the discharges of oil occur; whereas, according to the cases collected by Dr. Griscom, it appears that in several instances the symptom lasted too short a time to admit the idea of a chronic disease of that organ; and moreover, the complete recovery of some cases is an additional objection to the idea of Bernard.

Without attempting a solution of the knotty question, except to hint that the liver may possibly, on further investigation, be found to have some influence in the production of the unique excretion, the Doctor expressed the belief that with the lights of modern science impelling further researches into the arcana of the digestive functions, these will not much longer remain as such.

In illustration of the oleaginous character of the discharge from his patient, he lighted a candle, and exhibited a cake of soap prepared with it, which was referred to the section on practical medicine.

REPORT OF NOMINATING COMMITTEE.

The Committee on nominations presented the following

partial report:—For *President*, DR. ALDEN MARCH of N. Y. For *1st Vice President*, DR. JNO. COOPER of Del.; *2d Vice President*, DR. DAVID PRINCE of Ill.; *3d Vice President*, DR. C. C. COX of Md; *4th Vice President*, DR. E. S. CARR, of Wis.; which report was accepted and adopted.

The Chair appointed the following to escort the President to the chair: Drs. BRINSMAN of N. Y. and WALLACE of Penn. To escort the *1st Vice President*, Drs. GRISCOM of N. Y. and PEARSON of N. J.; the *2d Vice-President*, Drs. CUTTER of Wis. and EDMISTON of Wis.; the *3d Vice-President*, Drs. THOMAS and WICKERSHAM of Ill.; the *4th Vice-President*, Drs. HOLLISTER of Ill. and RICHARDSON of Mich.

The newly-elected President briefly returned thanks for the honor conferred. Next in order were the reports of Special Committees.

REPORT OF COMMITTEE ON PRIZE ESSAYS.

The report of the Committee on Prize Essays was read by Dr. D. L. MCGUGIN of Iowa. He reported that only one essay had been published, which was worthy of the prize medal. It is an inquiry into the properties and physiological uses of *Veratrum Viride*, with notices of its alkaloid, *Veratria*, as derived by certain processes. He considered the essay as worthy of publication and of the prize.

Dr. LAWSON moved that the prize be awarded to the author, and the paper forwarded to the Committee of Publication.

Dr. COX moved that the essay be referred to a special committee, of which Dr. MCGUGIN shall be chairman, to read the essay and report at some future time.

The motion of Dr. LAWSON prevailed, and the name of the author was then announced—SAMUEL R. PERCY, M.D., Professor of Materia Medica and Therapeutics in the New York Medical College. The prize is one hundred dollars.

A communication was received by Dr. DAVIS from Dr. E. R. SQUIBB, of New York, chairman of the committee on "the practical workings of the United States law relating to the inspection of drugs and medicines," stating that he could not attend, and offering to report next year. Agreed to.

Dr. A. K. GARDNER, of New York, presented a paper on the use and abuse of pessaries, but the reading was postponed till the next morning.

Dr. MCGUGIN, on Puerperal Tetanus, etc., reported progress and asked to be continued for another year, which was granted.

Dr. C. C. COX, on Hygienic Relations of Air, reported progress and asked to be continued. Granted.

Dr. J. W. RUSSELL of Ohio asked leave to continue his researches on the Effects of Stimulation in the Treatment of Fractures. Granted.

Report on Necrology is continued, Dr. C. C. COX as chairman.

THE HUNTER MEMORIAL.

The committee on the HUNTER memorial reported that the sum of \$357 had been raised, in one dollar subscriptions, towards the HUNTER fund, a portion of which has been forwarded to London. The smallness of the contribution was imputed mainly to the fact that the monument would stand on British soil, and the indifference felt by England about the present national trial had checked enthusiasm. The report was contained in a letter from Dr. BOWDITCH, which was received and placed on file. It was also decided that the account be closed, and the balance forwarded to England.

Dr. DAVIS reported, from the committee of arrangements, the following gentlemen as permanent members:—Drs. DANIEL B. BRENGLE, Manchester; VAN COURTLAND SECORD, Galena; J. B. SAMUEL, Carleton; DAVID DODGE, Chicago; JAMES S. KING, Lemont; D. F. CROUSE, Mount Carroll; all of Illinois. The nominations were confirmed.

THE CALOMEL ORDER OF THE SURGEON-GENERAL, U.S.A.

DR. LAWSON of Ohio called attention to the recent order of the Surgeon-General prohibiting the use of mercurials and tartarized antimony by the army surgical corps. He moved that the Association express its disapprobation of the order. The subject was referred to a committee, with instructions to inquire into the facts and report. The committee consists of one member of each State. The Chair appointed DRs. LAWSON, DALTON, STILES, CATLIN, BEISMARCK, PEARSON, ASHEW, WALLACE, HUFF, WOODWORTH, WING, PALMER, VAN DUZER, MCGUGIN, MENDENHALL, LOGAN, and POLINZ.

THE RELATIVE RANK OF ARMY SURGEONS.

DR. COX called attention to the want of a recognition of army surgeons, and urged that relative rank should be accorded to them. At present it was not possible for a surgeon to rise above the rank of Major. He therefore offered the following resolutions:—

Resolved, That a committee of five be appointed by the Chair to draft a memorial to Congress asking the enactment of a law by which surgeons in the service of the United States Army may be accorded relative rank in the same.

Resolved, That each medical gentleman present be urgently invited to use every proper influence with the members of Congress from his respective district, to urge the passage of a law favorable to this object at the ensuing session of Congress.

The resolutions were seconded by Dr. MCGUGIN in an able speech, in which he reviewed the relative responsibilities of the Surgeon and Commander, and spoke of the injustice perpetrated in the case of the former. The resolutions were discussed by several other delegates, and were finally adopted.

Remarks were then made by DR. ARNOLD of New York on the necessity of making medical provision for railroad accidents. He distributed printed copies of papers read by him before the New York State Medical Society and the Academy of Medicine.

SECOND DAY.

WEDNESDAY, 9 A.M.

The Association was called to order at 9 A.M., by the President, DR. ALDEN MARCH, of Albany, N. Y.

The minutes of the preceding day were read by the Secretary, and approved. The Chairman of the Committee of Arrangements read the names of members and delegates who registered their names since the last meeting. A large number of additional names were announced as having arrived, including a large number of physicians and surgeons of this city. He also proposed the following gentlemen as members, by invitation:—DRs. J. H. FOSTER, W. G. MILLAR, and J. A. BROWN, all of Illinois; and the following gentlemen as permanent members:—DRs. TIFFIN FINKE, KANSAS; W. C. HALL, Ohio; HIRAM WANGER, Ill.; H. K. DEAN, Ind.; H. C. ROBBINS, Ill.; E. J. DUFFIELD, Ill.; W. JAYNES, Dacotah Terr.; C. M. CLERK, Ill.

On motion of DR. JEWELL, of Penn., DR. J. MACGOWAN, an eminent medical missionary from China, was invited to take a seat with the Association. DR. MACGOWAN being desirous of addressing the Association on the state of medicine in China, it was resolved, on motion of DR. GRISCOM, of New York, to invite DR. MACGOWAN to do so, during the first half-hour of the afternoon session.

The reports of Committees being in order, on motion, that of the Committee on Medical Education was postponed until the afternoon session.

The Committee of Nomination made a further report, in which Baltimore was recommended as the place of next meeting of this Association. Accepted. DR. H. S. DOWNS of N. Y., moved to amend, by substituting the word New York for Baltimore. Considerable discussion arose, various members proposing different places. The member from Maryland, DR. COX, advocated the feasibility of appointing the next meeting at Baltimore, as a national measure. It was for the interest of the Association and the country to hold the meeting as far South as possible. The effect of holding it at Baltimore would be a healthy one upon that city and its medical interests. Men of wealth

and influence would open their doors and extend warm hospitality to the members of the Association.

DR. FURMAN, of New York, stated that the delegation from the New York County Medical Society, the New York Pathological Society, the New York Academy of Medicine; from the City Hospital, Bellevue Hospital, the University Medical College, College of Physicians and Surgeons, and the Bellevue Hospital Medical College, and various delegations from other societies and institutions from New York city, had been directly instructed to tender their invitation, and hoped that the Association would act courteously and deliberately, and with wisdom.

DR. DAVIS, of Illinois, followed DR. FURMAN, with an urgent request to accept this invitation extended by our New York brothers, and made a very animated, patriotic, and common-sense address.

THE ASSOCIATION TO MEET IN NEW YORK.

The question finally resolving itself into a choice between Baltimore and New York city, a vote was taken. The vote being doubtful, a count was called for, with the following result: New York, 68—Baltimore, 43. DR. DOWNE's amendment was adopted. On motion of DR. COX, of Maryland, the vote was made unanimous.

On motion of DR. GRISCOM, of New York, the remainder of the report, concerning the officers of the next meeting, committee, etc., was referred back to the Committee, for reconstruction, rendered necessary by the substitution of New York for Baltimore.

DR. DAVIS, of Illinois, read a communication from DR. BOWDITCH, of Mass., respecting the necessity for the organization of an ambulance system for the army, accompanied by a pamphlet upon the subject, which was distributed among the members.

DR. HOMAN, of Mass., moved that a committee of one from each State represented, be formed to memorialize the President of the U.S. upon the subject referred to by DR. BOWDITCH, which was passed, and the Chair appointed the following gentlemen to constitute such committee: DRs. EMMANS, DALTON, GRISCOM, HUBBARD, PEARSON, JR., COOPER, TROTTER, HAPF, ALMY, HIBBARD, PALMER, CLARKE, CARR, SPRAGUE, MENDENHALL, LOGAN, BOLINZ, and SURGEON SIMPSON. DR. GRISCOM being the Chairman thereof.

On motion of DR. UNDERHILL of N.Y., a resolution of thanks was passed unanimously to DR. WILSON JEWELL, late acting president, for the able and dignified manner in which he has presided over the deliberations of the association.

DR. HIBBARD, of Ind., offered a resolution, requiring the appointment of a committee to urge the compulsory examination of every person in the U.S. It was passed, and referred to the Section of Hygiene.

DEATH OF DR. ELI IVES, LATE PRESIDENT.

The committee on resolutions concerning the death of the late DR. ELI IVES, late president of this association, reported the following resolution:

"Whereas it has pleased the Divine Ruler of all events, to take from our midst one of the most distinguished and venerable members of our profession, ELI IVES, of New Haven, Conn., the late President of this Association; a man full of years and honor; and whereas it becomes us at all times to bow with submission to the righteous will of the Almighty, believing that He doeth all things well, therefore,

Resolved, That in the death of ELI IVES, this Association has lost a firm friend and ardent advocate for the elevation and dignity of the science of medicine—the profession one of its most highly gifted members, and society at large one of its highest ornaments.

Resolved, That while we mourn the dispensation that has deprived us of the presence and counsel of our late venerated President, we condole with his bereaved family, in the severe loss they have sustained.

Resolved, That a copy of the foregoing preamble and resolutions be forwarded to the family of the late ELI IVES, signed by the president and secretary, as an expression of the sympathies of this Association. All of which was adopted.

SECTIONS ABOLISHED.

On motion of DR. BYFORD of Ill., the session of sections was suspended for this session, in order that the voluntary communications might be read; it was also moved that all papers that have been referred to sections be read in

general session, and the meetings in sections be dispensed with.

Dr. MAYBERRY, of Penn., chairman of the committee on voluntary communications, presented a paper by Dr. ANDERSON, of Ill., on "Diathesis, in its surgical relation," which was read by the author. The paper of Dr. ANDERSON called up Dr. HIBBARD, of Ind., who combated in rather a lengthy speech some of the principal features presented. Dr. A. replied in support of his arguments, developing from his experience the truth of the position which he assumed. Other members participated in the discussion, after which the paper was approved of and referred to the committee of publications.

The meetings of the sections having been abolished, the association appointed Drs. HIBBARD, of Ind., JEWELL, of Penn., and GRISCOM, of New York, to constitute the committee on compulsory examinations, which had previously been referred to the section on Hygiene.

On motion of Dr. DAVIS, of Ill., the association adjourned to 3 P.M. for the transaction of general business.

AFTERNOON SESSION—SECOND DAY.

ACCLIMATIZATION OF CINCHONA PLANT.

The minutes of the morning session having been read and approved, Dr. J. MACGOWAN, Medical Missionary in China, according to a resolution passed this morning, was invited to address the association on the state of medical science in that empire. He explained to the meeting the professional bearings of his proposed scientific and industrial expedition to the unknown parts of Eastern Asia. Investigation in relation to the history of epidemics, into the materia medica, and into the ethnology of those lands, cannot fail to elicit many facts which promise to be of incalculable value to medicine and the collateral sciences. Dr. M. further expressed a hope that the association would take some measures to induce the Haytian Government to undertake the acclimatization of Cinchona trees (quinine plants). He gave an account of the success of the Dutch in Java, and of the English in India, and fully believes that in St. Domingo these invaluable plants might be readily cultivated, and thus secure additional supplies of this great remedy in fevers.

Dr. MACGOWAN has been in correspondence with the Haytian Ambassador in Washington on the subject, and solicits the influence of the profession, in urging the institution of the necessary experiments in those portions of America north of the equator where the soil and climate seem to afford sufficient encouragement.

In the course of his remarks, the speaker gave an account of the standing of the medical profession in China and Japan, of their medical literature, etc., and also stated the remarkable facts that they have made many discoveries in the use of remedies for certain diseases, in some cases either actually the same or very similar to those discovered and used here.

On motion of Dr. COX, of Maryland, Dr. T. O. EDWARDS, of Chicago, was invited to a seat on the platform.

On motion of Dr. HUBBARD, of Conn., Dr. JONATHAN W. BROOKS, of Chicago, was elected a permanent member.

The Chairman of the Committee of Arrangements read a list of newly arrived delegates since the last report. He also proposed the following gentlemen as permanent members:—Drs. I. B. BUSHELLE, Ind., C. TRUESDALE, Ill., W. R. FOX, Ill., L. F. WARNER, Ill., M. PARKER, Ill., which were elected.

Drs. L. T. HAVENS, of Wisconsin, and C. J. TAGGART, of Wisconsin, were invited to seats.

REPORT OF COMMITTEE ON EDUCATION.

Dr. COX, of Maryland, presented from the Committee on Medical Education the report which had been postponed from the morning session. He reviewed the past history of the profession in this respect, and the absence of proper attention to the subject. Many valuable suggestions as to needed improvements were also made. After the render-

ing of this report the Committee submitted the following resolutions, which, after discussion, were adopted:—

Resolved, That a thorough preliminary education in English, Latin, mathematics and physics, constitutes an essential pre-requisite to the admission of a student of medicine into the office of a medical preceptor, or as a matriculant of a respectable medical college.

Resolved, That the advancement of medical education demands a more extended and symmetrical course of instruction in the colleges, and a more thorough and impartial examination for the degree of doctor of medicine than at present prevail.

Resolved, That Medical Jurisprudence and Hygiene are highly important branches of Medical Science, deserving the careful consideration of all medical teachers and schools.

Resolved, That societies for medical improvement—State, district, and county—are important auxiliaries to the advancement and promotion of science, and are therefore highly recommended by this body, as valuable levers in the cause of medical education.

The Committee appointed to make a report upon the recent order of the Surgeon-General, prohibiting the use of mercurials and tartarized antimony by the army surgical corps, made a majority report through Dr. LAWSON, of Cincinnati, and an entirely antagonistic minority report by Dr. WOODWORTH, of Indiana. The former strongly favored the use of these remedial agents in the army, and the latter as strongly discountenanced their use there. Each report was backed up by resolutions rigidly endorsing the language of the report. After an animated discussion, on motion adjourned.

THIRD DAY.

THURSDAY, 9 A. M.

The Association was called to order by the President. After a partial reading of minutes, the further reading was dispensed with.

On motion, Dr. GREENE, of Mass., was invited to a seat on the platform.

The following gentlemen were admitted permanent members by invitation:

ISAAC SNYDER, Jackson, Mich.; R. B. TREAT, Janesville, Wis.

The following were admitted members by invitation:

GRANVILLE S. THOMAS, Joliet, Ill.; J. S. PASHLEY, Osceola, Ill.

Dr. COX, of the Army, announced the sudden departure of Dr. WILSON JEWELL, of Pennsylvania, caused by receiving intelligence of the unexpected death of a son, and offered a resolution of condolence, which was adopted.

Regular business being in order, the reports of Committees were taken up.

Dr. GILBERT, of the Army, in behalf of the Committee on the Extinction of the Aboriginal Races, reported progress, and, on motion, the Committee was continued another year.

The President having announced that the order of the Surgeon-General, U.S.A., debarring calomel and tartar emetic from the use of army surgeons, and which was previously referred to a committee, was in order, by consent of the Association the committee on the subject offered a substitute for the resolutions introduced yesterday.

There is a strong feeling manifest in the Association against this famous Order No. 6, of Surgeon-General Hammond, and it has more than once been referred to with expressionsavoring more of opposition than approval.

Pending the discussion, previous to the vote, Dr. COX, of the Army, said substantially as follows:

While the Association had the right to protest against the order of the Surgeon-General, he wished it to remember that the order referred exclusively to the corps of Army-Surgeons under his control, and had no reference to the use of those drugs in private practice. The order originated in the abuse of calomel by a number of incompetent surgeons in the army, appointed by the Governors of the several States, who consider the liver the pockhorse of the human system. The Medical Bureau of the United States comprises men of science, who understand how far the evil has been perpetuated and the necessity of correcting its abuses. The fact that other mercurials have not been interfered with, shows how great the necessity that exists for an order so apparently sweeping, and which the Association deems so arbitrary.

He did not desire to protract the debate, but felt it due his position to say something before the final vote should be taken. He was not up either to defend or condemn the order. In a long practice he had seen the abuse of calomel in improper hands, as well as its benefits from its legitimate and judicious use. He wished a discrimination to be made between the propriety of the order and the motives of the Surgeon-General. That gentleman's high character and motives are not to be questioned in this or any other public body. He deserved the thanks of the profession for the wholesome interest he had taken in the subject.

Dr. Cox's position called up several members, in reply. Calomel had fallen under the ban of an "unwise, unnecessary, and unprofessional" order, and that order received animadversion, ridicule, and unstinted opposition. The discussion became general, and while some desired to place no obstacles in the progress and encouragement of our armies in the field, their opinion of the order was of a character that culminated in the following resolutions, which were adopted:

"Resolved, That from evidence within our possession, we can but entertain the conviction, that the Surgeon-General of the U. S. Army has been led into expressions, in Order No. 6, which will convey errors respecting the abuse of calomel in the army, and we feel called upon to protest, so far as in our power, the reputation of the intelligent and self-sacrificing medical officers from the implied imputation of such general mal practice.

"Resolved, That while regarding spanamic medicines, particularly calomel and tartar emetic, when freely administered to soldiers in the field, the camp, or the hospital, where unfavorable hygienic conditions so commonly cause depression and asthenic conditions of the system, as being very often productive of injuries; yet that these articles, when judiciously employed, are useful, is a proposition according with the general opinion of the profession; and as abuse of an article is no just argument against its proper use, it is, in the judgment of this body, to be regretted that the object of correcting these abuses was not sought to be effected by an order of caution on the subject, and by dismissing from the service those disregarding such caution, and not by the extraordinary and, as we think, unjustifiable course of attempting to prevent, entirely, the use of articles, though liable to abuse, as are all powerful agents, yet which are well established in professional confidence as capable of useful application.

(Signed) L. M. LAWSON, Chairman."

The entire report, giving a history and details of the subject, in the same spirit, was also adopted.

On motion, it was resolved that a copy of the above resolutions be forwarded to the President of the United States, the Surgeon-General U.S.A., and the Secretary of War.

The Nominating Committee reported the following officers for the Association for the present year:

Secretaries—DRS. H. A. JOHNSON, Ill.; GUIDO FURMAN, N. Y.

Committee of Arrangements—DRS. JAMES ANDERSON, N. BLAKEMAN, T. M. MARKOE, T. C. FINNELL, AUSTIN FLINT, JR., E. S. F. ARNOLD, J. H. GRISCOM.

Committee on Prize Essays—DRS. D. F. CONDIE, Pa.; E. WALLACE, do.; WILSON JEWELL, do.; E. R. PEASLEE, N. Y.; ALFRED STILLE, Pa.

Committee on Medical Education—DRS. J. C. DALTON, N. Y.; M. L. LINTON, Mo.; JOHN FRISSELL, Va.; HOWARD TOWNSEND, N. Y.; W. H. BYFORD, Ill.

Committee on Medical Literature—DRS. L. M. LAWSON, Ohio; J. L. MCGUGIN, Iowa; WILLIAM MAYBERRY, H. NOBLE, Ill.; JOHN HOMANS, Mass.

Committee on Publication—DRS. F. G. SMITH, Chairman, Pa.; CASPAR WISTER, do.; ED. HARTSHORNE, do.; H. F. ASKEW, Del.; S. G. HUBBARD, Conn.; H. A. JOHNSON, Ill.; GUIDO FURMAN, N. Y.

Committee on Insanity—DRS. RALPH HILLS, Ohio; C. H. NICHOLS, D. C.; D. P. BISSELL, N. Y.; S. W. BUTLER, Pa.; JOHN S. BUTLER, Conn.

Dr. LEE, from the Committee on Medical Literature, reported progress, by letter, requesting permission to present his report directly to the Committee of Publication.

A report was received from the Committee on Voluntary Communications.

Dr. DALTON was excused from further serving as chairman of the Committee on the Ambulance Corps, and Dr. J. M. WARREN was substituted.

Dr. N. G. DAVIS commenced reading a paper on "The American Method of Treating Joint Diseases and Deformities," which was referred to the Committee of Publication, and its further reading suspended.

Dr. HOMBERGER, delegate from New York, in behalf of Dr. ELSBERG, of New York, showed some instruments for the treatment of diseases of the larynx, a "laryngoscopic mouth-piece," a laryngeal brush, a "sponge carrier," a porte-caustic, an insufflation-tube, a fumigating-tube, and an electropole. These latter six instruments have all a curvature of 112°, which Dr. E. found most efficient in carrying out the objects of laryngoscopic local medication.

RETROVERSION OF THE IRIS, ETC.

Dr. HOMBERGER presented a case of "retroversion of the iris, dislocation of the lens into the anterior chamber, with complete detachment of the retina." He stated that such cases are exceedingly rare, and that three only are known to him reported by Von Ammon in the Archives of Ophthalmology. There was no apparent cause for this anomaly, which came on on the right eye without inflammation, and caused what was considered sympathetic irritation of the left eye. The eye was enucleated, and some months afterwards the patient came with a trembling iris on the other eye and considerably impaired vision. The ophthalmoscopic examination did not give a satisfactory result. A luxation of the lens had to be supposed on the ground of the trembling of the iris, though the ophthalmoscope did not reveal the margin of the bud as a black line, within the pupillary space. The application of atropine would evidently have been unjustifiable under such circumstances, and the patient was directed to present herself before Dr. H. when the symptoms would aggravate.

Dr. H. asked the members of the Association whether a similar case had occurred in their practice, and concluded with some further remarks on the case on the inquiries of Dr. ALDEN MARCH. Both communications were referred to the Committee of Publication.

The paper of Dr. GRISCOM, on a case of diarrhoea adiposa (read on Thursday afternoon), was, on motion of Dr. FARMAN, referred to the Committee of Publication.

SULPHITES OF LIME AND SODA AS DISINFECTANTS.

Dr. A. FISHER, of Illinois, presented a paper on the use of sulphites of lime and soda in the treatment of hospital gangrene, phlebitis, erysipelas, and other zymotic diseases, and related a number of cases. The first was that of a lady: nearly the whole left leg was destroyed by sphacelus. It was necessary to amputate just above the knee, but little hæmorrhage occurring, only three or four small arteries being necessary to tie; not a drop of blood was found in the femoral artery, and it was so contracted and filled with fibrin and pus that it was not ligated. The vein was also completely filled with a reddish substance, the product of inflammation. Under the use of 3j. doses of the sulph. soda in solution every six hours, the patient gradually improved; entire convalescence was established. The second case was of malignant (or blood poison) rheumatism. She took the sulph. of lime 3j. every four hours for fourteen days, and no other remedy, with the exception of a pill consisting of lead and opium, for diarrhoea for a few days, was used. She commenced to improve in twenty-four hours, and continued so to do.

The husband of the second case was injured on the patella while the wife was ailing. The second day erysipelas commenced in the wound, extending up to the thigh, forming an abscess, which was opened, and the patient appeared to be relieved; but severe constitutional symptoms occurred in a few days, for which he took the sulphite of lime in 3j. doses every four hours, and nothing else. In four or five days the recovery was perfect.

Dr. F.'s attention was first directed to the use of the sulphites in these cases by reading a review of an article "On Diseases depending upon Morbid Fermentation and their Treatment," by Dr. G. POLLI of Milan. Published in Braithwaite's Retrospect and taken from the Dublin Quar-

terly Journal, May, 1862. He gives a statement of Dr. POLLI's views on the action of the sulphites by experiments on dogs, and states that he first came to use them by reading that article, and then gives three more cases. 1st. A child, three years old, with scarlatina and erysipelas, cured by a teaspoonful of the saturated solution of sulphite of soda every two hours for one week, the constitutional symptoms improving in twenty-four hours after taking it. 2d. A very bad case of phlebitis and erysipelas following typhoid fever and periostitis of the tibia. Cured by the sulphite of lime, though tinct. ferri muriat. was used, but with no good effect. 3d. A case of malignant metritis after an abortion at the second or third month. Cured by sulphite of lime alone: 3j every three hours for five or six days. He says that the sulphites of lime and soda are well retained on the stomach, and produce no sensible effect for the first twenty-four hours, when the patient begins to improve in all respects. He thinks the sulphites of magnesia and potass may be as beneficial as the sulphite of soda and magnesia from Dr. POLLI's experiments. Has always used the pure sulphites, prepared by Dr. SCOTT.

On motion, the paper was referred to a committee of three, of which the author is chairman, to continue his investigations and report again next year.

Dr. Cox, of the Army, offered two resolutions—one of thanks to the citizens of Chicago for their kindness and hospitality shown to the members of the Association during its session here, and another of thanks to the retiring secretary, Dr. HUBBARD, for his able and faithful services.

The amendments to the Constitution of the Association proposed at the last meeting, were called up, discussed, and rejected.

A complimentary resolution, by Dr. HARR of Va., thanking the President and Secretary for their services, was adopted.

The following gentlemen, on motion of the Committee of Arrangements, were elected permanent members of the Association: L. H. CARY, Toledo, Iowa; HORATIO HITCHCOCK, Chicago; L. F. WARNER, Chicago; L. P. CHENEY, Chicago; C. W. SHUMWAY, Chicago.

Dr. N. S. DAVIS, of Ill., spoke of the use of sulphite of lime in erysipelas, and stated that in the last half of March and the first part of April, 1863, erysipelas was more prevalent in the city than usual; and, as a consequence, several very severe cases, occurring among the poorer classes, were received into the Mercy Hospital.

They constituted the subject of several clinical lectures to the class attending the summer course of instruction in the Chicago Medical College (Medical Department of Lind University), thereby enabling the students to study the disease practically in all its stages. He related an aggravated case of erysipelatos inflammation of the face (except the chin), the ears, the mastoid spaces, and part of the scalp, occurring in an adult male patient, an interne of the Mercy Hospital of that city. The second, also an erysipelatos case, was an adult female in the same charity, the malady affecting the same portions of the body as in the preceding case. Case III. was that of another adult female in the same charity; had miscarried when four months *enroute*. On the third day after her miscarriage severe uterine phlebitis established itself. All these cases were treated very successfully by the use of sulphite of lime in 3j. doses every three hours. The nourishment in all three cases was chiefly milk porridge and animal broths.

In commenting on these cases, it was not claimed that they were sufficient to establish the efficacy of sulphite of lime in the treatment of diseases dependent on blood-poisoning or degeneration. But they do show that the remedy may be given in large doses with perfect safety, and, taken in connexion with the cases related by Dr. FISHER, it is rendered highly probable that the sulphites will be found exceedingly valuable in the treatment of a whole class of severe and often fatal diseases. On motion, the Society adjourned to three p.m.

AFTERNOON SESSION—THIRD DAY.

THURSDAY, 3 P.M.

The Convention assembled and was called to order by the President at three p.m. The minutes of the morning session were read and approved.

A letter was read from Dr. RUSSELL, of Ohio, asking to be excused from further service on a special committee to report on "Stimulation in Fracture." Request granted.

A similar communication was also read from Prof. SAGE, of Michigan, wishing to be excused from a special committee on Blood Corpuscles, and disposed of in the same manner.

Dr. N. S. DAVIS offered an amendment to the Constitution, providing for the appointment of one permanent Secretary. Under the rules of the Association the amendment lays over one year. The Committee on Nominations reported the appointment of numerous gentlemen to act upon various matters that might come before the next annual meeting. The report was accepted, and committee discharged.

Dr. HUBBARD moved an addition of one from each State be made to the Committee on Necrology. Carried.

The following resolutions were offered by Dr. ARNOLD, of New York, and carried:—

Whereas, The railroad is fast becoming the great medium of land travel in all parts of the world; and whereas, in spite of all regulations and care, serious accidents are continually occurring, attended with loss of life, such being greatly augmented by the total want of any local medical provision to meet such, as well as by the absence of any appliances whatever calculated to strengthen the hands of the surgeon; therefore be it

Resolved, That such medical provision shall be made by the railroad; and that by the diminution of suffering, as well as by the saving of life, while economy would accrue to the railroad companies, the interests of humanity would be greatly served.

Dr. HIBBARD, of Ind., offered the following amendment of the Constitution:—

That the President and Vice-President of this Association elected each year, shall assume the functions of their respective offices at the beginning of the meeting of the year next succeeding their election.

Under the rule the proposed amendment will lie over till next meeting.

Dr. MCGUGIN, of Iowa, from the committee appointed to memorialize Congress on the subject of relative rank and pay of army surgeons, made a lengthy report, and, on motion, the report was accepted and adopted.

On motion of Dr. GRISCOM it was ordered that the report be printed and distributed to the members of Congress, heads of departments, and others likely to influence action upon the subject.

Dr. WING offered the following as an addition to the memorial, which was adopted:—

Resolved, That it be recommended that, in carrying out the object of this memorial, every promotion shall be attended by a suitable examination into his qualification, and the merits of his military record.

Dr. HOMBERGER, of New York, offered the following resolution, which was, on motion of Dr. PRINCE, referred to the Committee on Medical Education for the coming year:—

Resolved, That the American Medical Association recommend to the Faculties of Medical Colleges in this country, to create Chairs of Ophthalmology, recently so importantly advanced by the invention of the ophthalmoscope.

On motion of Dr. HUBBARD, of New York, the Association adjourned *sine die*.

MASSACHUSETTS MEDICAL SOCIETY.—The annual meeting of this Society will be held in the Berkshire Medical College, Pittsfield, on Wednesday, June 17th, at 10 o'clock a.m. The Annual Discourse, at 12 o'clock m., *precisely*, by Dr. MORRILL WYMAN, of Cambridge. The Anniversary Dinner will take place at West's Hall, at two o'clock. Literary Gentlemen interested in Medical Science, and students in medicine, are invited to hear the Annual Discourse. The Western Boston and Worcester, and Connecticut River Railroads, have agreed to an abatement of one half the regular fare from any point on those roads to Pittsfield, and back, going on the 16th and 17th, and returning on the 17th and 18th of June, in favor of the members of the Mass. Medical Society desirous of attending the meeting.

American Medical Times.

SATURDAY, JUNE 13, 1863.

ASSOCIATION OF MEDICAL SUPERINTENDENTS OF THE INSANE.

THE Medical Superintendents of the Insane have had their annual meeting. They have discussed, as usual, many of the peculiar diseases of the insane, and much mutual benefit has been derived from this interchange of opinion. We read the proceedings of their annual meetings with great interest, and commend the zeal with which individual members study the intricate questions of psychology. But it has not unfrequently occurred to us, that too much of the time of the sessions is occupied with the discussion of mental diseases, and too little with those more practical subjects which relate to the physical well-being of the insane. We do not desire to discourage the study of cerebral pathology; such knowledge lies at the very foundation of rational therapeutics. But we would have medical superintendents consider those subjects which appertain to the immediate care of the insane, and which they alone are capable of establishing upon a proper basis. Some of these questions we propose to bring to the attention of the members of the Association, and we would ask for them a respectful consideration.

1. Can they not devise some plan by which the unrecognized forms of insanity, so prevalent in the community, shall be properly treated? Almost daily we read the sickening details of horrible domestic tragedies, enacted by an insane person who has been known to act *strangely* for months, perhaps for years. The newspaper of to-day contains the following:—

HORRIBLE AFFAIR—A HUSBAND MURDERS HIS WIFE, CHILD, AND HIMSELF.—This morning the members of the family of Wm. Steele, of East Hartford, on going to his room found his chamber deluged with blood, and Mr. Steele lying dead on the floor, with his throat horribly cut. His wife was on the bed, with her throat cut from ear to ear, and an infant, six months old, had its head almost cut off. All were dead—the child still warm. Steele's hand grasped a razor, and it was perfectly evident that he had murdered his wife and child, and then killed himself. The Coroner's Jury rendered a verdict of insanity. Mr. Steele had been an inmate of an insane asylum at different times during the last twenty years. His age was 53 years.

We could multiply *ad infinitum* these instances of wholesale murder by individuals who not only have not been restrained of their liberty, but who are allowed to indulge the very passions which ultimately lead to the committal of crime. There can be no doubt that public and domestic security require that this class of insane should be promptly placed under medical care, and suitable means taken to prevent crime, and relieve the equilibrium of an unbalanced mind. It is a subject of the very first importance to the community, and one which professed alienists are alone qualified to discuss intelligently.

2. Medical Superintendents should interest themselves in securing better treatment of the poor insane scattered through the jails, prisons, alms-houses, and eleemosynary institutions of the country. To-day the poor-houses of the country are vocal with the groans and curses of the poor

insane. Ignorant and often brutal overseers treat these helpless inmates with a neglect and cruelty which should shock the sensibilities of a savage. In the most enlightened communities of this and other States, these poor creatures are chained in damp, gloomy, and filthy rooms, from which they are never allowed to emerge. Fresh air, sunlight, and green fields, the true restoratives of a mind diseased, they never enjoy. Is there no remedy for this crying evil?

3. Every State should have its well established Lunacy Commission. In this State great efforts have been made to accomplish this most desirable result, but all efforts have proved unavailing, except so far as the creation of a proper public opinion. If such Commissions, composed of qualified persons, were in active operation in each State, the insane would soon be cared for, and litigated questions in the jurisprudence of insanity would be promptly and correctly settled. And yet the Association of Medical Superintendents seems to take no interest in securing the proper legislation. A strong representation from this body by a report would go far towards securing the establishment of Lunacy Commissions.

4. Have we reached in this country the very ultimatum of asylum management? We might infer that such is the case, from the interest which the Association manifests in this matter. A beautiful country location, and an expensively built stone edifice, comprise the groundwork of an American Asylum for the Insane. If grounds are attached, they are designed to give picturesqueness, and are limited to unfrequented walks, or perhaps a small and unproductive farm. The great and vital question of treating the insane in the open air, and so employing them as to restore health, and yet make these institutions self-supporting, is not sufficiently understood in the United States. It is the system which must yet be adopted everywhere in this country, especially where lands are abundant and cheap. No one who reads the instructive letter of PROF. LEE, on the Colony of Fitz-James, near Paris, published in the *MEDICAL TIMES* a few weeks back, can doubt the importance of establishing our asylums on a similar basis.

We have ventured to call the attention of our brethren engaged in the practical study and treatment of insanity, to these subjects of ordinary everyday interest, in the hope that they will give the powerful aid of their influence towards effecting much-needed reforms and improvements. In our opinion, no more earnest and devoted body of scientific men meet among us than those who have in charge the interests of the insane. The field of practical usefulness to which they devote their lives is too much shunned by philanthropists, and is in general regarded with aversion by society. The poor lunatic is a hopeless exile from his friends and family, an object of fear and abhorrence in whatever community he happens to fall ill. How elevated, how Christ-like is that charity which gathers these wandering, wayward sheep into the fold, binds up the bruised spirit, soothes the aching temples, and calmly reassures the trembling, faltering step. It should not satisfy gentlemen engaged in this noble calling, to convene in annual sessions from their beautiful asylums, to read and discuss long dissertations on perhaps unpractical subjects, to eat a sumptuous dinner, and visit some well conducted institution. They should earnestly grapple with the practical questions of the day, and by concert of action secure those popular or legislative reforms which may seem desirable.

THE WEEK.

As we had anticipated, the late meeting of the American Medical Association was peculiarly interesting. Subjects of great practical importance were brought forward and discussed in an earnest and friendly spirit. Medical education was again placed in a prominent position, and will, we hope, even come under the annual consideration of the Association. The recent order of the Surgeon-General, striking calomel and tartar emetic from the supply list, was discussed with great animation. Many other subjects relating both to the Army and to the profession were very thoroughly reviewed. The Association seems to have renewed its existence with great vigor. Nearly as many States were represented as at any former period. At the next annual meeting, to be held in New York, it will receive a still more powerful impulse.

WE have received the first number of *The Sanitary Reporter*, published by the U.S. Sanitary Commission, at Louisville, Ky. It is conducted by Dr. J. S. NEWBERRY, and is designed "for gratuitous distribution among soldiers and societies, and that portion of the people of the Loyal States who care to be informed as to the objects and works of the Sanitary Commission, and who desire fresh and reliable information as to the state of the Army—its necessities, and the best way to supply them." This number contains several interesting reports from medical inspectors on the condition of the armies in the Western Department, with detailed statements of the operations of the Commission to supply the necessities of the sick. The *Reporter* is a very timely publication, and is destined to distribute a large amount of useful information both among the people and the soldiers.

THE transportation of persons sick of contagious diseases in ordinary vehicles is beginning to attract deserved attention. Small-pox and similar diseases are undoubtedly largely distributed among the people through public conveyances. The Commissioners of Charities and Corrections are endeavoring to secure the passage of a City Ordinance which will establish the certainty of conveying the sick of contagious diseases in carriages especially set apart for that purpose.

THE *Medical and Surgical Review* is the title of a new medical journal published at Melbourne, Australia. It is well printed, and contains the usual variety of original articles, reviews, retrospect, etc. It is edited by JAMES KEENE, late Surgeon of the West London Hospital, and published by E. F. BAILLIÈRE.

Obituary.

GEORGE LEWIS, M.D.

DR. LEWIS was a native of Naugatuck, Conn. He commenced the study of medicine in his native town, attended a course of lectures at the Dartmouth Medical College, N. H., and graduated at the College of Physicians and Surgeons, New York, at the session 1850-51. He immediately commenced practice in this city, and after several years acquired a lucrative business. Some three or four years ago, while actively engaged in practice, he had the first premonitions

of the development of pulmonary phthisis in his system, a disease to which he had a strong hereditary predisposition. The disease made but slow progress, and he for a considerable time has continued in practice. He was finally compelled to seek another climate, especially for winter residence, and after much inquiring selected Minnesota. He passed the winter of 1861-62 at St. Paul, and enjoyed such remarkably good health, that he returned to that city in the fall of 1862 with the intention of making it a permanent residence. The past winter, however, was not as favorable to him. He first had an attack of pneumonia, from which he recovered. Subsequently he was attacked with pleuropneumonia, which proved fatal on the 24th of April last, at the age of 39.

DR. LEWIS was a man of the highest moral tone, a warm and generous friend, and a Christian. He was ardently devoted to his profession, and most attentive to his patients. His contributions to medical literature were few, but highly important. In 1857 he published in the *New York Journal of Medicine* a very elaborate statistical article on Perforation of the Appendix Vermiformis. During the last year he published in the *American Medical Times* valuable articles on the Climate of Minnesota. His attention having been called to the relations of phthisis to climate, he had commenced a thorough systematic and very philosophical study of this subject, and had he lived he would doubtless have produced a valuable work. He had already prepared a preliminary paper, which he did not live to revise.

Whatever may be our sorrow at the loss of the fathers in the profession, it should be twofold greater when the young who combine high professional qualifications with the most exemplary moral character, are suddenly removed from the stage of action.

Army Medical Intelligence.

SURGEON-GENERAL'S OFFICE,
WASHINGTON CITY, June 1, 1863.

HEREAFTER the same monthly report of sick and wounded required by regulations from General Hospitals, will be forwarded to this office through the Medical Director, from all separate brigade divisions, or corps divisions which hitherto have not been required to send such reports. Where brigade hospitals are constituted into division hospitals, or division hospitals into corps hospitals only, consolidated monthly reports will be required.

The provisions of this order are intended to apply to every detached hospital, and hospital transports.

Where such reports have not already been sent, they will be prepared from the records of the hospital to date from its establishment.

JAS. R. SMITH,
Act. Surgeon-General.

ORDERS, CHANGES, &c.

Dr. William Frothingham, of Scranton, Pa., has declined the appointment of Assistant Surgeon of Volunteers.
Surgeon Lewis Dyer, 51st Illinois Vols., dismissed by Special Orders No. 158, current series, from the Adjutant-General's Office, has been under special circumstances, and upon the recommendation of Major-General McPherson, commanding 17th Army Corps, restored to the service, provided the vacancy has not been filled.

By direction of the President, Assistant Surgeon Washington Bury, 122d Pennsylvania Vols., has been dishonorably mustered out of service, to date when his regiment is mustered out, for neglecting the sick at the battle of Chancellorville.

The muster into service of T. B. Drake, as Assistant Surgeon, 1st Arkansas Infantry, has been revoked, and he is discharged the service from the date of muster in for incompetency, the appointment having been made without competent authority.

Surgeon E. E. Atkinson, 2d Regiment, Eastern Shore, Maryland, Vols., has been honorably discharged the service of the United States on account of physical disability.

So much of Special Orders 29, current series, from the Adjutant-General's Office, as honorably discharged from the service, on account of ill-health, Surgeon George Kemble, U.S.V., has been revoked, and he has been restored to his position in the army.

So much of Special Orders 197, current series, from the Adjutant-

General's Office, as dismissed Surgeon James D. Hewitt, 167th New York Vols., Surgeon S. M. Hand, 187th Pennsylvania Vols., Assistant Surgeon J. B. Ashcorn, 126th Ohio Vols.—the two former "for absence without proper authority," and the latter for "accepting bribes for procuring discharge of soldiers"—is amended to read: Surgeon James D. Hewitt, 119th New York Vols., Assistant Surgeon S. M. Hand, 187th New York Vols., Assistant Surgeon J. P. Ashcorn, 116th Pennsylvania Vols.

Assistant Surgeon A. J. Maloney, Mississippi Marine Brigade, having tendered his resignation, is hereby honorably discharged the service, on account of physical disability resulting from disease of the lungs.

Surgeon C. B. Frost, 15th Vermont Vols., having tendered his resignation, has been honorably discharged the service of the United States, to date May 8, 1893.

So much of Special Orders 204, current series, from the Adjutant-General's Office, as discharged Surgeon N. P. Monroe, 20th Maine Vols., from the service, for declining to submit to an examination by a Medical Board, has been revoked, and he, having tendered his resignation, is hereby honorably discharged the service of the United States, to date May 18, 1893.

Surgeon Josiah Simpson, U.S.A., and Surgeon C. C. Cox, U.S.V., have been designated by the Surgeon-General to represent the Medical Department, U.S.A., at the meeting of the American Medical Association, to be held at Chicago, Ill., June 2, 1893.

Assistant Surgeon F. T. Dade, U.S.V., is on leave of absence for 20 days in New York city.

Surgeon B. A. Vanderkleef, U.S.V., has been placed in charge of St. John's College Hospital, Annapolis, Md.

Surgeon T. P. Gibbons, U.S.V., has been granted leave of absence for 30 days for the benefit of his health.

Assistant Surgeon Franklin Gruba, U.S.V., has been assigned to duty with the First Brigade of the Volunteer Division, Artillery Reserve, Army of the Potomac.

Surgeon Abram L. Cox, U.S.V., is at Orange, N. J., on 20 days' leave for the benefit of his health.

Surgeon D. W. Bliss, U.S.V., has been reinstated in charge of the Army-square Hospital, by order of the Secretary of War.

Surgeon W. H. Gohrecht, U.S.V., has been assigned to the charge of the Seminary Hospital, at Covington, Ky., and to duty as member of the Board for the examination for discharge in the Hospitals at Cincinnati, and Covington, Ky.

The following assignments to duty of Medical Officers have been made: Surgeon F. A. Kefler, U.S.V., now on duty at the General Hospital, West Philadelphia, Pa., and Assistant Surgeon H. A. Schellin, U.S.V., to report to Major-General Banks, commanding Department of the Gulf.

Surgeon W. A. Conover, U.S.V., now on duty at Alexandria, Va., to report to the Medical Director, at Fort Monroe, Va.

Surgeon D. J. McKibbin, U.S.V., now on duty at Hilton Head, S. C., and Assistant Surgeons William Carroll, W. O. McDonald, and C. J. Kipp, U.S.V., to report in person to Major-General Rosecrans, commanding Department of the Cumberland, and by letter to Assistant Surgeon-General Wood, at St. Louis, Mo.

Assistant Surgeon J. M. Pittman, U.S.V., to report in person to Surgeon Thomas A. McParlin, U.S.A., in charge of General Hospital at Annapolis, Md., and by letter to Surgeon Simpson, Medical Director, at Baltimore, Md.

Assistant Surgeon J. B. Bellangee, U.S.V., to report to Major-General Foster, commanding Department of North Carolina.

Assistant Surgeon W. A. Banks, U.S.V., to report in person to Major-General Grant, commanding Department of the Tennessee, and by letter to Assistant Surgeon-General Wood, at St. Louis.

Medical Inspector Augustus C. Hamlin, U.S.V., now on duty in Washington, D. C., to relieve Medical Inspector G. W. Stipp, U.S.A., in the Department of the South, the latter on being relieved to report in person to the Secretary of War.

Surgeon D. W. Wainwright, U.S.V., now on duty in the Middle Department, and Assistant Surgeon C. B. Whitte, U.S.A., now on duty at Pittsburgh, Pa., to report in person to General Grant, for duty in the Department of the Tennessee, and by letter to Assistant Surgeon-General Wood, at St. Louis, Mo.

Surgeon J. J. Milham, U.S.A., now on duty in Philadelphia as a member of the Army Medical Board, which will shortly adjourn, to report for duty to the Medical Director, Army of the Potomac.

Assistant Surgeon G. W. Hogeboom, U.S.V., to report for duty to the General commanding the Department of the Cumberland, and by letter to the Assistant Surgeon-General at St. Louis, Mo.

Surgeon G. W. Martin, 14th Maine Vols., has been mustered out of service, from July 17th, 1892, the date he joined for duty, he having been irregularly commissioned.

A Board, to consist of Surgeon Chas. McDougall, Surgeon E. L. Abadie, and Assistant Surgeon H. L. Sheldon, U.S.A., has been ordered to assemble at West Point, N. Y., on the sixth inst., to examine into the physical qualifications of the members of the graduating class. On the completion of this duty a report of the proceedings of the Board will be made to the War Department, and a special report in the case of any individual thought to be wanting in the ability requisite for the military service. The same Board will continue in session, until it has examined into the physical condition of all newly appointed cadets who may present themselves, and will report their proceedings to the War Department. The junior member will act as recorder of the Board.

The Board for the examination of candidates for the appointment of Assistant Surgeons of Volunteers, consisting of Surgeons A. P. Myler, E. L. Stanford, and M. Goldsmith, recently in session at Louisville, Ky., has been dissolved, and a new Board convened at Cincinnati, O., for the same purpose, by order of the Surgeon-General. Surgeons J. T. Carpenter, W. A. Gohrecht, and Assistant Surgeon E. Freeman, U.S.V., are members of the Board.

Assistant Surgeon E. Freeman, U.S.V., has been relieved from duty on the Board of Examiners now in session at Cincinnati, O., and Assistant Surgeon Wm. Grinstead, U.S.V., has been detailed in his place.

There are one hundred vacancies in the Corps of Surgeons and Assistant Surgeons of Volunteers.

Surgeon Norman Gay, U.S.V., has been assigned to duty as Medical Director, Left Wing, 16th Army Corps, Headquarters, Jackson, Tenn.

Surgeon S. S. Mulford, U.S.V., has relieved Surgeon Thomas M. Getty, U.S.A., as Medical Director, 4th Army Corps, at Yorktown, Va.

Surgeon H. J. Churchman, U.S.V., is sick at the Officers' Hospital, Memphis, Tenn.

Surgeon C. W. Hornor, U.S.V., has been assigned to duty in charge of General Hospital No. 23, Nashville.

Surgeon W. Clendenin, U.S.V., is sick, and under medical treatment at Nashville, Tenn. He has also tendered his resignation on account of feeble health.

Surgeon D. W. Hood, U.S.V., Medical Director, General Peck's Command, at Suffolk, Va., was captured by a scouting party from the 2d Mississippi (rebel) regiment, while returning from an expedition on the Blackwater, May 16, 1863. Was taken to Richmond, and confined in the Libby Prison until May 23d, when he was released unconditionally. He has returned to Suffolk, and resumed his duties.

Surgeon C. F. H. Campbell, U.S.V., has resumed his duties as Medical Director, 1st Division, 8th Army Corps, after a short leave of absence.

Surgeon Henry Palmer, U.S.V., is on detached service, conducting convalescents from Baltimore, Md., and York, Pa., to the General Hospitals at Pittsburg, Cincinnati, and Indianapolis.

Surgeon Zenas E. Bliss, U.S.V., is performing the duty of Medical Purveyor at Baltimore, Md., during the absence of Surgeon C. C. Cox, at Chicago, as delegate to the American Medical Association.

The General Hospitals Calvert Street and Continental Hotel, Baltimore, Md., have been closed.

Assistant Surgeon Wm. Threlkeld, U.S.V., has been assigned to duty in General Hospital No. 15, Nashville, Tenn.

Assistant Surgeon W. S. Frink, U.S.V., has been transferred from General Hospital No. 18 to General Hospital No. 20, Nashville, Tenn.

Surgeon W. H. Thorn, U.S.V., is temporarily on duty as Medical Director, 11th Army Corps.

Assistant Surgeon Frank Maecham, U.S.V., has been assigned to duty in General Hospital No. 9, Louisville.

Surgeon Henry James has been assigned to duty in charge of General Hospital, 6th Army Corps, at Potomac Creek, Va.

Assistant Surgeon C. E. Swasey, U.S.V., has been placed on duty in Washington, D. C., attending sick and wounded officers of Volunteers.

Assistant Surgeon E. Y. Chase, C. C. Dumrecher, D. B. Sturgeon, H. A. Schellin, and J. W. Pittino, U.S.V., have been appointed Surgeons.

Drs. Robert Reyburn, of Pennsylvania, S. E. Fuller, of Connecticut, George F. French, of New Hampshire, Wm. C. Bennett, of Connecticut, and P. A. O'Connell, of Massachusetts, have been appointed Assistant Surgeons of Volunteers.

By direction of the President, Surgeon C. D. Moore has been dismissed the service of the United States with loss of all pay and allowances for giving certificates of disability for discharge in cases of enlisted men on insufficient grounds.

The appointment of Assistant Surgeon A. C. Schwarzwelder, U.S.A., has been revoked by direction of the President.

A new General Hospital, called the Shumard Hospital, has been opened at Hickman, Ky.

Surgeon R. M. S. Jackson, U.S.V., has been assigned to duty as Medical Director, 23d Army Corps, Lexington, Ky.

Medical News.

RHODE ISLAND HOSPITAL.—An adjourned meeting of the corporators and friends of the proposed Rhode Island Hospital was held in the Common Council chamber, His Excellency Gov. Smith in the chair.

Dr. S. B. Tobey, for the committee appointed at the last meeting to devise and recommend measures to secure the establishment of this important charity, presented their report. The committee have visited various hospitals in Boston, New York, and Philadelphia, and as the result of their investigations present the following propositions:

1. That the proposed Rhode Island Hospital should be designed to be in all respects an institution of the very first class.
2. That its capacities should at the outset be adequate to the accommodation of not less than seventy-five patients, and that its building be constructed with special reference to future enlargement.
3. That it ought to be provided with separate accommodations for the sexes—to admit of a judicious classification of patients, and the isolation of particular cases, and that it should be furnished with the most approved arrangements for the supply of water—for warming—for ventilation—for cooking, and for the laundry, and also with a hall for a chapel.
4. That such a building or buildings with the requisite appurtenances described, may be expected to cost not less than one hundred thousand dollars.
5. That the establishment thus contemplated will require to be endowed at the beginning for its adequate support with a permanent fund of not less than \$150,000.
6. That it is expedient to delay the further organization of the corporation under the charter till the enterprise has reached a more advanced stage of its progress.

Wm. Binney, Esq., presented a communication, proffering to the Corporation, in behalf of different parties, the sum of one hundred thousand dollars, subject to certain prescribed conditions.

METEOROLOGY AND NECROLOGY OF THE WEEK IN THE CITY AND COUNTY OF NEW YORK.

Abstract of the Official Report.

From the 1st day of June to the 8th day of June, 1863.

Deaths.—Men, 83; women, 79; boys, 55; girls, 90; total, 307. Adults, 162; children, 188; males, 181; females, 169; colored, 14. Infants under two years of age, 126. Children born of native parents, 12; foreign, 148.

Among the causes of death we notice:—Apoplexy, 8; infantile convulsions, 27; croup, 9; diphtheria, 8; scarlet fever, 15; typhus and typhoid fevers, 24; consumption, 40; small-pox, 2; measles, 5; dropsy in head, 16; infantile marasmus, 15; cholera infantum, 2; inflammation of brain, 18; of bowels, 7; of lungs, 18; bronchitis, 4; congestion of brain, 0; of lungs, 0; erysipelas, 9; diarrhoea and dysentery, 9. 174 deaths occurred from acute diseases, and 42 from violent causes. 227 were native, and 123 foreign; of whom 90 came from Ireland; 68 died in the City Charities; of whom 23 were in Bellevue Hospital, and 12 died in the Immigrant Institution.

Abstract of the Atmospheric Record of the Eastern Dispensary, kept in the Market Building, No. 57 Essex street, New York.

June, 1863.	SIX A.M.				TWO P.M.				TEN P.M.			
	Therm.	Baromet.	Wind.	Therm.	Baromet.	Wind.	Therm.	Baromet.	Wind.	Therm.	Baromet.	Wind.
1st.	56.58	6	29.54	S.W.	80.15	29.53	S.W.	74.8	29.60	W.		
2d.	55.68	7	29.65	S.W.	76.14	29.68	S.W.	62.9	29.71	W.		
3d.	53.58	6	29.89	N.W.	79.13	29.91	S.W.	58.8	29.94	W.		
4th.	48.51	7	29.95	N.W.	67.18	29.99	N.W.	54.9	30.01	W.		
5th.	51.60	6	30.04	S.E.	73.11	30.10	S.E.	56.7	30.01	S.		
6th.	53.60	3	30.05	S.E.	70.9	30.06	S.E.	55.5	30.03	W.		
7th.	50.51	4	30.04	N.W.	69.10	30.07	N.W.	51.5	30.01	N.W.		

REMARKS.—1st, 2d, 3d, 4th, and 5th, Clear, with fresh wind. 6th, Light rain, A.M.; cloudy, P.M. 7th, Rain early, variable day; with fresh wind. Rain for the week one-tenth of an inch.

SPECIAL NOTICES.

NEW YORK ACADEMY OF MEDICINE.—A *Stated Meeting* will be held on Wednesday, the 17th inst., at 8 o'clock precisely.

SECTION OF OBSTETRICS AND DISEASES OF WOMEN AND CHILDREN.—A *Stated Meeting* of this Section will be held at the house of the Chairman, S. T. HUBBARD, 47 Ninth st., on Monday, the 15th inst., at 8 o'clock P.M. Subject of discussion—The Preventive Treatment of Abortion.

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REFERENCES.

Dr. J. M. CARNOCHAN, Prof. Surgery, N. Y. Med. College; Dr. Geo. T. ELLIOT, Prof. Obs. and Dis. of Women and Children, Bellevue Hospital Med. Col.; Dr. Wm. H. VAN BUREN, Prof. Anat. Univ. Med. Col.; Dr. HENRY G. COX, (late) Prof. Theory and Prac. of Med., N. Y. Med. Col.; Dr. J. MARION SIMS, Surg. Women's Hosp.; Dr. B. F. BARKER, Prof. Obs. and Dis. of Women and Children; Dr. E. E. PEASLEE, (late) Prof. in N. Y. and Hanover (Me.), Med. Col.; Dr. L. A. SAYRE, Prof. Orthopedic Surgery, Bellevue Hosp. Col.; Dr. A. E. HOSACK, and the profession generally in New York.

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To the Medical Profession.—Dr. I.

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